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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

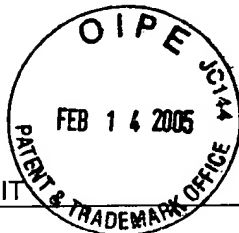
Hirohisa SUZUKI, et al.

Serial No: 09/603,184

Confirmation No: 3365

Filed: June 26, 2000

For: NOISE CANCEL CIRCUIT



Art Unit: 2687

Examiner: Ramos Feliciano, Eliseo

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450, on  
February 11, 2005

Date of Deposit  
John P. Scherflacher, Reg. No. 23,009

Name  
Signature  
Date 02/11/05

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ A Request for Continued Examination (RCE) is enclosed.  
☒ A Petition for Extension of Time (1-month) is enclosed.  
☒ No additional fee is required.

The fee has been calculated as shown below:

THE FEE HAS BEEN CALCULATED AS SHOWN BELOW:								
	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE	10	-20	20	**	0	LG=\$50 SM=\$25	\$50	\$ 0
INDEPENDENT CLAIMS FEE	1	-3	3	***	0	LG=\$200 SM=\$100	\$200	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180			\$ 0
TOTAL								\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ -0- to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ Please charge the fee of \$ 120 to cover the extension fee to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
HOGAN & HARTSON L.L.P.

By:

John P. Scherflacher  
Registration No. 23,009  
Attorney for Applicant(s)

Date: February 11, 2005

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